

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Planned Parenthood Votes

ADDRESS (number and street)

123 William St, 10th Floor

Check if different
than previously
reported. (ACC)

New York

NY

10038

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00489799

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☒ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

11

08

2016

in the
State of

NY

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

10

01

2016

through

M M M / D D D / Y Y Y Y Y Y

10

19

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Gustafson, Liz, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

10

27

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period: From: M M / D D / Y Y Y Y Y
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y
10 / 19 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2016		1143446.70
(b) Cash on Hand at Beginning of Reporting Period.....	3883072.42	
(c) Total Receipts (from Line 19)	2374400.00	18042004.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6257472.42	19185451.24
7. Total Disbursements (from Line 31).....	3501585.83	16429564.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2755886.59	2755886.59
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1364600.53	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		0	1		2	0	1	6		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	9		2	0	1	6		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1516200.00	16470519.54
(ii) Unitemized	200.00	10985.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1516400.00	16481504.54
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	858000.00	1560500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2374400.00	18042004.54
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2374400.00	18042004.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2374400.00	18042004.54

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	406455.71	1877034.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	406455.71	1877034.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	333333.34	1693389.41
24. Independent Expenditures (use Schedule E)	2039468.01	9741931.43
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1000000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1000000.00
29. Other Disbursements (Including Non-Federal Donations).....	722328.77	2117209.09
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3501585.83	16429564.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3501585.83	16429564.65

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2374400.00	18042004.54
34. Total Contribution Refunds (from Line 28(d))	0.00	1000000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2374400.00	17042004.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	406455.71	1877034.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	406455.71	1877034.72

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F3XA

Transaction ID :

This amendment is being filed to disclose independent expenditures (transactions B63485-86 and B634718-721)
inadvertently left off the original report.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Aberly, Naomi, D, ,

Mailing Address 8 Mount Vernon Place

City
BostonState
MAZip Code
02108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2016

Transaction ID : A2016-2047183

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bartley, Anne, , Ms.,

Mailing Address 3580 Clay Street

City

San Francisco

State

CA

Zip Code

94118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self - EmployedOccupation (for Individual)
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 05 / 2016

Transaction ID : A2016-2047185

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Berliant, Jennie, , ,

Mailing Address 1846 Keys Crescent

City

Cincinnati

State

OH

Zip Code

45206-1825

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 07 / 2016

Transaction ID : A2016-2047186

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

23000.00

TOTAL This Period (last page this line number only)..... ►

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID :

Please note that our committee follows all federal regulations, including those found at 11 CFR 104.7(a) governing the solicitation of contributors. This committee specifically requests all pertinent information from contributors, including employer and occupation; informs contributors that the committee is required by law to report the same; and, makes a follow-up request for omitted information when necessary. The committee thus complies with the best efforts rules.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 141

(check only one)

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blake, Robert, L., Jr.

Mailing Address 2322 Meadow Lark Lane

City
Columbia

State
MO

Zip Code
65201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2016

Transaction ID : A2016-2047187

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bressler, Karen, I, Ms.,

Mailing Address 16 Turkeyland Cove Road

City
Edgartown

State
MA

Zip Code
02539

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2016

Transaction ID : A2016-2047188

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carpentier, Lori, , ,

Mailing Address 950 Victors Way, #100

City
Ann Arbor

State
MI

Zip Code
48108-5217

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PP Mid & South Michigan

Occupation (for Individual)
PP employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2016

Transaction ID : A2016-2047189

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carr, Richard, , ,

Mailing Address 801 Mesa Rd.

City
Monterey

State
CA

Zip Code
93940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 12 / 2016

Transaction ID : A2016-2047190

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clasquin, Rani, , ,

Mailing Address 911 Old Stonehedge Street

City
West Lake Hills

State
TX

Zip Code
78746-3529

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self - Employed

Occupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : A2016-2047191

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Connelly, Serena, S, ,

Mailing Address 3156 Brookhollow Dr.

City
Dallas

State
TX

Zip Code
75234

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Contran Corp

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2047192

Amount of Each Receipt this Period

100000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cunningham, Aimee, B, ,

Mailing Address 628 Brandon Way

City
Austin

State
TX

Zip Code
78733-3263

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 07 / 2016

Transaction ID : A2016-2047193

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Daunt, Robert, , ,

Mailing Address 830 Sinex Ave.

City

Pacific Grove

State

CA

Zip Code

93950

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2016

Transaction ID : A2016-2047194

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Doyle, James, , ,

Mailing Address 2001 Hawks Ridge Drive

City

Verona

State

WI

Zip Code

53593-9195

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Foley & Lardner LLP

Occupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 07 / 2016

Transaction ID : A2016-2047195

Amount of Each Receipt this Period

2000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Eck, Dennis, , ,

Mailing Address 302 Magnolia Ave

City

Corono del Mar

State

CA

Zip Code

92625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 11 / 2016

Transaction ID : A2016-2047196

Amount of Each Receipt this Period

30000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ellerbach, Connie, , ,

Mailing Address 555 San Antonio Rd, #410

City

Mountain View

State

CA

Zip Code

94040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Fenwick & West, L.L.

Occupation (for Individual)

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 11 / 2016

Transaction ID : A2016-2047197

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fitt, Lawton, , ,

Mailing Address 132 Perry St. 10th Floor

City

New York

State

NY

Zip Code

10014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 12 / 2016

Transaction ID : A2016-2047198

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

42000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garner, Albert, H, Mr.,

Mailing Address 1510 Albemarle Rd.

City

Brooklyn

State

NY

Zip Code

11226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lazard

Occupation (for Individual)

Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2016

Transaction ID : A2016-2047199

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Grove, E.K., , ,

Mailing Address 171 Main Street #278

City

Los Altos

State

CA

Zip Code

94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2016

Transaction ID : A2016-2047200

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gruber, Linda, W, Ms.,

Mailing Address PO Box 214

City

Ross

State

CA

Zip Code

94957-0214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 08 / 2016

Transaction ID : A2016-2047201

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Haney, Michael, , ,

Mailing Address 924 Roaring Springs Road

City
Fort Worth

State
TX

Zip Code
76114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 03 / 2016

Transaction ID : A2016-2047202

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harris, Bruce, , ,

Mailing Address 90 Alamo Avenue

City
Berkeley

State
CA

Zip Code
94708-1328

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 07 / 2016

Transaction ID : A2016-2047203

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heintz, Frank, , ,

Mailing Address 212 Raymond Avenue

City
Charlottesville

State
VA

Zip Code
22903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 07 / 2016

Transaction ID : A2016-2047204

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hirst, Thomson, , ,

Mailing Address PO Box 320307

City
Alexandria

State
VA

Zip Code
22320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2047205

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jaffe, Nora, , ,

Mailing Address 2424 Ellentown Rd.

City
La Jolla

State
CA

Zip Code
92037

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2016

Transaction ID : A2016-2047206

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johns, Gordon, M, ,

Mailing Address 621 N. Granados Avenue

City
Solana Beach

State
CA

Zip Code
92075-1218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 12 / 2016

Transaction ID : A2016-2047207

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jubelirer, Michelle, , ,

Mailing Address 17269 Oak View Drive

City
Encino

State
CA

Zip Code
91316-4015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2016

Transaction ID : A2016-2047208

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lambrecht, Kenneth, S, ,

Mailing Address 6404 Alasan Cove

City
Austin

State
TX

Zip Code
78730-2734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Planned Parenthood

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2016

Transaction ID : A2016-2047228

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lee, Barbara, F, ,

Mailing Address 131 Mt. Auburn Street, Ste 2

City
Cambridge

State
MA

Zip Code
02138-5752

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Philanthropy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

295000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 13 / 2016

Transaction ID : A2016-2047209

Amount of Each Receipt this Period

45000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McGill Johnson, Alexis, , Ms.,

Mailing Address 24 E 35th Street

City
New York

State
NY

Zip Code
10016-3806

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Values Institute

Occupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2016

Transaction ID : A2016-2047210

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meislin, Barbara, J, Ms.,

Mailing Address PO Box 1277

City
Tiburon

State
CA

Zip Code
94920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self - Employed

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2016

Transaction ID : A2016-2047211

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mostyn, Amber, A, ,

Mailing Address 3810 W. Alabama Street

City
Houston

State
TX

Zip Code
77027-5204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mostyn Law Firm

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 04 / 2016

Transaction ID : A2016-2047212

Amount of Each Receipt this Period

200000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

203000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murray, Georgia, , ,

Mailing Address 433 Shawmut Ave

City
Boston

State
MA

Zip Code
02118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2047213

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Newton, Claire, , ,

Mailing Address 22 Charles River Square

City
Boston

State
MA

Zip Code
02114-3266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 11 / 2016

Transaction ID : A2016-2047216

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Newton, Michael, A, Mr.,

Mailing Address 2830 NW Xavier Street

City
Portland

State
OR

Zip Code
97210-2418

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nike, Inc.

Occupation (for Individual)
Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2016

Transaction ID : A2016-2047215

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Newton, Susan, , ,

Mailing Address 50 Central Park West, #5C

City
New York

State
NY

Zip Code
10023-6006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 11 / 2016

Transaction ID : A2016-2047214

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reece, Charlie, , Mr.,

Mailing Address 3604 Darwin Road

City
Durham

State
NC

Zip Code
27707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Rho, Inc.

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 07 / 2016

Transaction ID : A2016-2047219

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reiss, Dale, , Ms.,

Mailing Address 589 Kinzie Island Court

City
Sanibel

State
FL

Zip Code
33957-5021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2016

Transaction ID : A2016-2047220

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rosenthal, Richard, , Mr.,

Mailing Address 8 Melville Lane

City
Cincinnati

State
OH

Zip Code
45208-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self - Employed

Occupation (for Individual)

Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 04 / 2016

Transaction ID : A2016-2047182

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shattuck, Elizabeth, , ,

Mailing Address 4627 Ashton Drive

City
Sacramento

State
CA

Zip Code
95864

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2016

Transaction ID : A2016-2047222

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinberg, Dayle, , ,

Mailing Address 110 Mitchford Road

City
Wayne

State
PA

Zip Code
19087-2231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PPSP

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 09 / 2016

Transaction ID : A2016-2047223

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1001500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stoesz, Sarah, , ,

Mailing Address 1901 E River Parkway

City
Minneapolis

State
MN

Zip Code
55414-3675

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PP Minnesota North Dakota South Dakota

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 10 / 2016

Transaction ID : A2016-2047224

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Trent, Melanie, , ,

Mailing Address 8212 E Tortuga View Lane

City
Scottsdale

State
AZ

Zip Code
85266-1911

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 12 / 2016

Transaction ID : A2016-2047225

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vaid, Urvashi, M, ,

Mailing Address 230 W End Avenue, #10c

City
New York

State
NY

Zip Code
10023-3664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Columbia Law School

Occupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 08 / 2016

Transaction ID : A2016-2047226

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wong, Carmen, , ,

Mailing Address 400 W 113th Street, #401W

City
New York

State
NY

Zip Code
10025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 10 / 2016

Transaction ID : A2016-2047227

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

1516200.00

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AFT Solidarity

Mailing Address 555 New Jersey Avenue NW

City
Washington

State
DC

Zip Code
20001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☒ Other (specify) ▼
Not Applicable

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2016

Transaction ID : A2016-15220

Amount of Each Receipt this Period

250000.00

☐ Memo Item
Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. House Majority PAC

Mailing Address 700 13th St. NW, Suite 600

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☒ Other (specify) ▼
Not Applicable

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2016

Transaction ID : A2016-15219

Amount of Each Receipt this Period

8000.00

☐ Memo Item
In-kind contribution of research services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Senate Majority PAC

Mailing Address 700 13th Street NW Suite 600

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☒ Other (specify)
Not Applicable

Aggregate Year-to-Date ▼

300000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2016

Transaction ID : A2016-15216

Amount of Each Receipt this Period

300000.00

☐ Memo Item
Federal PAC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

558000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 141

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Priorities USA Action

Mailing Address 601 13th Street NW Suite 610N

City
WashingtonState
DCZip Code
20005FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☒ Other (specify) ▼
 Not Applicable

Aggregate Year-to-Date ▼

750000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2016

Transaction ID : A2016-15215

Amount of Each Receipt this Period

250000.00

☐ Memo Item
Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PP Advocacy Project LA County

Mailing Address 555 Capitol Mall/ Ste. 1425

City
SacramentoState
CAZip Code
95814FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☒ Other (specify) ▼
 Not Applicable

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-15214

Amount of Each Receipt this Period

50000.00

☐ Memo Item
Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

300000.00

858000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 141

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Catalyst LLC Operating Account

Mailing Address 1090 Vermont Ave./Ste. 300

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Database Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634196

Amount of Each Disbursement this Period

187.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. House Majority PAC

Mailing Address 700 13th St. NW, Ste 600

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Offset to in-kind receipt. See Sched A for 11c.

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634325

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Berlin Rosen LTD

Mailing Address 501 Third Street NW

City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Communications Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634194

Amount of Each Disbursement this Period

40000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48187.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 141

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Trister, Ross, Schadler and Gold PLLC

Mailing Address 1666 Connecticut Ave NW # 5

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Legal Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634258

Amount of Each Disbursement this Period

4705.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Rath, Young and Pignatelli PC

Mailing Address 1 Capital Plaza

City
ConfordState
NHZip Code
03301Purpose of Disbursement
Legal Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634259

Amount of Each Disbursement this Period

682.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Drew & Rogers Inc.

Mailing Address 30 Plymouth St.

City
FairfieldState
NJZip Code
07004Purpose of Disbursement
Promotional materials

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634250

Amount of Each Disbursement this Period

22922.59

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

28310.60

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 141

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Drew & Rogers Inc.

Mailing Address 30 Plymouth St.

City
FairfieldState
NJZip Code
07004Purpose of Disbursement
Promotional Materials

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634195

Amount of Each Disbursement this Period

17095.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund Inc.

Mailing Address 123 William St, 10th Floor

City
New YorkState
NYZip Code
10038Purpose of Disbursement
Reimbursement for Program Staff time

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634140

Amount of Each Disbursement this Period

307999.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund Inc.

Mailing Address 123 William St, 10th Floor

City
New YorkState
NYZip Code
10038Purpose of Disbursement
Reimbursement for photography services

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634142

Amount of Each Disbursement this Period

1561.17

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

326656.30

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 141

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund Inc.

Mailing Address 123 William St, 10th Floor

City
New YorkState
NYZip Code
10038Purpose of Disbursement
List Rental for fundraising mail

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B634143

Amount of Each Disbursement this Period

455.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund Inc.

Mailing Address 123 William St, 10th Floor

City
New YorkState
NYZip Code
10038Purpose of Disbursement
Reimbursement for travel expenses

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				12				2016					

FEC Identification Number

C

Transaction ID : B634203

Amount of Each Disbursement this Period

222.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Godfrey and Kahn S.C.

Mailing Address 500 New Jersey Ave NW # 375

City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Legal Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				04				2016					

FEC Identification Number

C

Transaction ID : B634254

Amount of Each Disbursement this Period

1071.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1749.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 141

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Godfrey and Kahn S.C.

Mailing Address 500 New Jersey Ave NW # 375

City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Legal Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634255

Amount of Each Disbursement this Period

561.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 27025

City
RichmondState
VAZip Code
23261Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634413

Amount of Each Disbursement this Period

941.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1502.44

TOTAL This Period (last page this line number only)..... ►

406406.09

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. United We Can

Mailing Address 1800 Massachusetts Ave., NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

011

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C C00523621

Transaction ID : B634133

Amount of Each Disbursement this Period

333333.34

Contribution

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

333333.34

TOTAL This Period (last page this line number only).....▶

333333.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2016

Mailing Address 434 West 33rd Street

City
New YorkState
NYZip Code
10001Purpose of Disbursement
Reimb. for Staff time; in kind to PP Action Fund NC

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

FEC Identification Number

C

Transaction ID : B634192

Amount of Each Disbursement this Period

6753.00

In kind to non-fed cmte

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Votes Colorado IE Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		12		2016

Mailing Address 7155 E. 38th Avenue

City
DenverState
COZip Code
80207Purpose of Disbursement
Contribution to non-federal committee in CO

011

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

FEC Identification Number

C

Transaction ID : B634137

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Pivot Group

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2016

Mailing Address 1701 I Street NW Suite 550

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Canvass lit re NV state candidates

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

FEC Identification Number

C

Transaction ID : B634191

Amount of Each Disbursement this Period

10242.85

MEMO

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

56753.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Canvass re NV state candidates

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634193

Amount of Each Disbursement this Period

38571.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Maine Action Fund PAC

Mailing Address 443 Congress St, 3rd Floor

City
PortlandState
MEZip Code
04101Purpose of Disbursement
Contribution to non-federal committee in ME

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

011

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634135

Amount of Each Disbursement this Period

80000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Advocates of MT PAC

Mailing Address 2525 Fourth Avenue North Suite 201

City
BillingsState
MTZip Code
59101Purpose of Disbursement
Contribution to non-federal committee in MT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

011

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : B634138

Amount of Each Disbursement this Period

40000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158571.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. The Pivot Group

Mailing Address 1701 I Street NW Suite 550

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Canvass Lit

011

Category/
Type

Candidate Name

Sununu, Chris, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				06				2016					

FEC Identification Number

C

Transaction ID : B631589

Amount of Each Disbursement this Period

5205.00

MEMO

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. The Pivot Group

Mailing Address 1701 I Street NW Suite 550

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Canvass Lit

011

Category/
Type

Candidate Name

Van Ostern, Colin, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				06				2016					

FEC Identification Number

C

Transaction ID : B631588

Amount of Each Disbursement this Period

5205.00

MEMO

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Blueprint Interactive

Mailing Address 2229 North Pollard St

City
ArlingtonState
VAZip Code
22207Purpose of Disbursement
Digital Ad Buy

011

Category/
Type

Candidate Name

Levasseur, Joseph, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632889

Amount of Each Disbursement this Period

33284.23

Memo Item

☐**SUBTOTAL** of Disbursements This Page (optional)..... ►

33284.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Blueprint Interactive

Mailing Address 2229 North Pollard St

City
ArlingtonState
VAZip Code
22207Purpose of Disbursement
Digital Ad Buy

011

Category/
Type

Candidate Name

Pappas, Chris, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632888

Amount of Each Disbursement this Period

64714.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SKDKnickerbocker

Mailing Address 1150 18th St., NW #800

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Digital Ad Production

011

Category/
Type

Candidate Name

Pappas, Chris, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632856

Amount of Each Disbursement this Period

4200.00

MEMO

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SKDKnickerbocker

Mailing Address 1150 18th St., NW #800

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Digital Ad Production

011

Category/
Type

Candidate Name

Pappas, Chris, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632862

Amount of Each Disbursement this Period

858.50

MEMO

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

64714.20

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. SKDKnickerbocker

Mailing Address 1150 18th St., NW #800

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Digital Ad Production

011

Category/
Type

Candidate Name

Sununu, Chris, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C

Transaction ID : B632854

Amount of Each Disbursement this Period

7900.00

MEMO

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SKDKnickerbocker

Mailing Address 1150 18th St., NW #800

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Digital Ad Production

011

Category/
Type

Candidate Name

Sununu, Chris, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C

Transaction ID : B632864

Amount of Each Disbursement this Period

1717.00

MEMO

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Blueprint Interactive

Mailing Address 2229 North Pollard St

City
ArlingtonState
VAZip Code
22207Purpose of Disbursement
Digital Ad Buy

011

Category/
Type

Candidate Name

Sununu, Chris, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C

Transaction ID : B632885

Amount of Each Disbursement this Period

91972.05

Memo Item

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

91972.05

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Blueprint Interactive

Mailing Address 2229 North Pollard St

City
ArlingtonState
VAZip Code
22207Purpose of Disbursement
Digital Ad Buy

011

Category/
Type

Candidate Name

Van Ostern, Colin, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632886

Amount of Each Disbursement this Period

62489.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SKDKnickerbocker

Mailing Address 1150 18th St., NW #800

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Digital Ad Production

011

Category/
Type

Candidate Name

Van Ostern, Colin, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632855

Amount of Each Disbursement this Period

8425.00

MEMO

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SKDKnickerbocker

Mailing Address 1150 18th St., NW #800

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Digital Ad Production

011

Category/
Type

Candidate Name

Van Ostern, Colin, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632863

Amount of Each Disbursement this Period

1717.00

MEMO

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

62489.08

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. SKDKnickerbocker

Mailing Address 1150 18th St., NW #800

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Digital Ad Production

011

Category/
Type

Candidate Name

Weeks, Dan, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632857

Amount of Each Disbursement this Period

4225.00

MEMO

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SKDKnickerbocker

Mailing Address 1150 18th St., NW #800

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Digital Ad Production

011

Category/
Type

Candidate Name

Weeks, Dan, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632861

Amount of Each Disbursement this Period

858.50

MEMO

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Blueprint Interactive

Mailing Address 2229 North Pollard St

City
ArlingtonState
VAZip Code
22207Purpose of Disbursement
Digital Ad Buy

011

Category/
Type

Candidate Name

Weeks, Dan, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B632887

Amount of Each Disbursement this Period

64714.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

64714.20

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Blueprint Interactive

Mailing Address 2229 North Pollard St

City
ArlingtonState
VAZip Code
22207Purpose of Disbursement
Digital Ad Buy

011

Category/
Type

Candidate Name

Wheeler, David, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2016

FEC Identification Number

C

Transaction ID : B632890

Amount of Each Disbursement this Period

33284.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood New Hampshire Action Fund

Mailing Address 18 Low Avenue

City
ConcordState
NHZip Code
03301Purpose of Disbursement
Contribution to non-federal entity for NH state work

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		13		2016

FEC Identification Number

C

Transaction ID : B634136

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Latino Decisions

Mailing Address 15 South Grady Way, Suite 620

City
SeattleState
WAZip Code
98057Purpose of Disbursement
Research Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2016

FEC Identification Number

C

Transaction ID : B634242

Amount of Each Disbursement this Period

28100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

111384.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood of MN Political Action Fund

Mailing Address 1200 Lagoon Avenue

City
MinneapolisState
MNZip Code
55408Purpose of Disbursement
Contribution to non-federal committee in MN

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		13		2016

FEC Identification Number

C

Transaction ID : B634139

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Community Outreach Group

Mailing Address 1110 Vermont Ave N.W. #300

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Canvass re NH state candidates

Candidate Name

011

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		04		2016

FEC Identification Number

C

Transaction ID : B634415

Amount of Each Disbursement this Period

53446.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

78446.47

TOTAL This Period (last page this line number only).....▶

722328.77

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 40 OF 141

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MackCrounse Group

Nature of Debt (Purpose):
Canvass literature

Mailing Address 2001 N. Beauregard St. Ste 420

City

Alexandria

State

VA

Zip Code

22311

Outstanding Balance Beginning This Period

3950.00

Transaction ID : D439020

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SKDKnickerbocker LLC

Nature of Debt (Purpose):

Production Fees: Television Advertisement

Mailing Address 1150 18th Street NW/Ste. 800

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

7736.00

Transaction ID : D439027

Amount Incurred This Period

50060.00

Payment This Period

2736.00

Outstanding Balance at Close of This Period

55060.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

O'Brien Garrett (formerly known as OMP Inc.)

Nature of Debt (Purpose):

Printing of IE mail piece and fundraising
mailer. See schedule E

Mailing Address 1133 19th St. NW #300

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

23788.68

Transaction ID : D439029

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

23788.68

1) SUBTOTALS This Period This Page (optional)..... ►

82798.68

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 41 OF 141

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Itzamna Translations Company

Nature of Debt (Purpose):

Translation services. See schedule E

Mailing Address P.O. Box 1015

City
GlendaleState
AZZip Code
85311

Outstanding Balance Beginning This Period

367.25

Transaction ID : D439030

Amount Incurred This Period

19.32

Payment This Period

0.00

Outstanding Balance at Close of This Period

386.57

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Alliance Marketing Distributor Inc.

Nature of Debt (Purpose):

Printing of postcards and posters See
schedule E

Mailing Address 133 Industrial Ave.

City
Hasbrouck HeightsState
NJZip Code
07604

Outstanding Balance Beginning This Period

965.00

Transaction ID : D439032

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

965.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Network Solutions

Nature of Debt (Purpose):

Purchase of domain name. See schedule E

Mailing Address 13861 Sunrise Valley Dr. #300

City
HerndonState
VAZip Code
20171

Outstanding Balance Beginning This Period

15.99

Transaction ID : D439033

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15.99

1) **SUBTOTALS** This Period This Page (optional)..... ►

1367.56

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 42 OF 141

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Planned Parenthood Advocates of Ohio

Nature of Debt (Purpose):

Canvassing. See schedule E

Mailing Address 206 E. State Street

City

Columbus

State

OH

Zip Code

43215

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439037

Amount Incurred This Period

40017.13

Payment This Period

0.00

Outstanding Balance at Close of This Period

40017.13

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Planned Parenthood Rocky Mountains Action Fund

Nature of Debt (Purpose):

Events. See schedule E

Mailing Address 7155 E. 38th Avenue

City

Denver

State

CO

Zip Code

80207

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439038

Amount Incurred This Period

25375.51

Payment This Period

12411.10

Outstanding Balance at Close of This Period

12964.41

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Latino Decisions

Nature of Debt (Purpose):

Polling. See schedule E

Mailing Address 15 South Grady Way, Suite 620

City

Seattle

State

WA

Zip Code

98057

Outstanding Balance Beginning This Period

55300.00

Transaction ID : D439039

Amount Incurred This Period

0.00

Payment This Period

55300.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

52981.54

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 43 OF 141

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Planned Parenthood Pennsylvania Advocates

Nature of Debt (Purpose):

Phone calls, events, Consultant: strategy and messaging, canvassing. See schedule E

Mailing Address 1514 North 2nd Street

City
HarrisburgState
PAZip Code
17102

Outstanding Balance Beginning This Period

730.00

Transaction ID : D439040

Amount Incurred This Period

15000.00

Payment This Period

15000.00

Outstanding Balance at Close of This Period

730.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Terris Barnes & Walters

Nature of Debt (Purpose):

Canvass Lit-Estimated costs. See Schedule E

Mailing Address 400 Montgomery St # 700

City
San FranciscoState
CAZip Code
94104

Outstanding Balance Beginning This Period

18205.07

Transaction ID : D439041

Amount Incurred This Period

13708.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31913.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Outreach Group

Nature of Debt (Purpose):

Canvassing. See Schedule E

Mailing Address 1110 Vermont Ave N.W. #300

City
WashingtonState
DCZip Code
20050

Outstanding Balance Beginning This Period

126708.02

Transaction ID : D439042

Amount Incurred This Period

1217141.57

Payment This Period

713551.46

Outstanding Balance at Close of This Period

630298.13

1) **SUBTOTALS** This Period This Page (optional)..... ►

662941.20

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 44 OF 141

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Pivot Group

Nature of Debt (Purpose):

Canvassing Lit. See Schedule E

Mailing Address 1720 I Street NW Suite 550

City

Washington

State

DC

Zip Code

20005

Outstanding Balance Beginning This Period

3540.00

Transaction ID : D439043

Amount Incurred This Period

46590.71

Payment This Period

0.00

Outstanding Balance at Close of This Period

50130.71

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Journeyman Press

Nature of Debt (Purpose):

Canvassing Lit. See Schedule E

Mailing Address 11 Malcolm Hoyt Dr.

City

Newburyport

State

MA

Zip Code

01950

Outstanding Balance Beginning This Period

1263.00

Transaction ID : D439044

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1263.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FedEx Print Center

Nature of Debt (Purpose):

Canvassing Lit. See Schedule E

Mailing Address 3 Colby Ct.

City

Bedford

State

NH

Zip Code

03110

Outstanding Balance Beginning This Period

1470.00

Transaction ID : D439045

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1470.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

52863.71

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 45 OF 141

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Drew & Rogers, Inc.

Nature of Debt (Purpose):

Small items & distribution. See Schedule E

Mailing Address 30 Plymouth Street

City
FairfieldState
NJZip Code
07004

Outstanding Balance Beginning This Period

3612.93

Transaction ID : D439046

Amount Incurred This Period

0.00

Payment This Period

3612.93

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blueprint Interactive

Nature of Debt (Purpose):

Online Advertising. Actual billed amount
changed to 35250.00 See Schedule E

Mailing Address 2229 North Pollard St

City
ArlingtonState
VAZip Code
22207

Outstanding Balance Beginning This Period

39000.00

Transaction ID : D439047

Amount Incurred This Period

116950.00

Payment This Period

35250.00

Outstanding Balance at Close of This Period

120700.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

API Source

Nature of Debt (Purpose):

Online Advertising. See Schedule E

Mailing Address 2229 North Pollard St

City
LanhamState
MDZip Code
20706

Outstanding Balance Beginning This Period

1427.00

Transaction ID : D439048

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1427.00

1) SUBTOTALS This Period This Page (optional)..... ►

122127.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 46 OF 141

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Franciska Farkas

Nature of Debt (Purpose):

Digital Ad Production. See Schedule E

Mailing Address 102 Clinton Ave.

City
BrooklynState
NYZip Code
11205

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439049

Amount Incurred This Period

11000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Priorities USA

Nature of Debt (Purpose):

Digital Ad Buy See Schedule E

Mailing Address 601 13th Street NW Suite 610N

City
WashingtonState
DCZip Code
20005

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439050

Amount Incurred This Period

305459.62

Payment This Period

0.00

Outstanding Balance at Close of This Period

305459.62

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Viridiana Vidal Gonzzali

Nature of Debt (Purpose):

Media Consulting. See Schedule E

Mailing Address 4012 Linniki Street

City
North Las VegasState
NVZip Code
89032

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439051

Amount Incurred This Period

20000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

1) SUBTOTALS This Period This Page (optional)..... ►

336459.62

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 47 OF 141

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mission Control LLC

Nature of Debt (Purpose):

Canvass Lit. See Schedule E

Mailing Address 624 Hebron Ave #200

City
GlastonburyState
CTZip Code
06033

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439052

Amount Incurred This Period

5689.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5689.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Work for Progress Inc

Nature of Debt (Purpose):

Canvassing. See Schedule E

Mailing Address 1543 Wazee St #440

City
DenverState
COZip Code
80202

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439053

Amount Incurred This Period

35400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Planned Parenthood Advocates Mar Monte

Nature of Debt (Purpose):

Canvassing. See Schedule E

Mailing Address 1605 The Alameda

City
San JoseState
CAZip Code
95126

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439054

Amount Incurred This Period

11972.22

Payment This Period

0.00

Outstanding Balance at Close of This Period

11972.22

1) SUBTOTALS This Period This Page (optional)..... ►

53061.22

2) TOTALS This Period (last page this line number only)..... ►

1364600.53

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

1364600.53

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 48 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input checked="" type="checkbox"/> Memo Item The Pivot Group			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 01 / 2016</div> </div>	
Mailing Address 1720 I Street NW Suite 550				
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2102.50</div>	
Purpose of Expenditure Canvass Lit		Category/Type 004	Transaction ID : B629889 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 01 / 2016</div> </div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			2016	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item The Pivot Group			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 01 / 2016</div> </div>	
Mailing Address 1720 I Street NW Suite 550				
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2102.50</div>	
Purpose of Expenditure Canvass Lit		Category/Type 004	Transaction ID : B629890 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 01 / 2016</div> </div>	
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			2016	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

MM / DD / YYYY

10 / 31 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 49 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Latino Decisions			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 04 / 2016		
Mailing Address 15 South Grady Way, Suite 620			Amount 14050.00		
City Seattle	State WA	Zip Code 98057	Transaction ID : B621451 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Purpose of Expenditure Polling. Full pymt. of transaction B621451 originally reported on 2016 FEC M9. See Schedule D		Category/Type 004			
Name of Federal Candidate: Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought		3209251.41	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Latino Decisions			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 04 / 2016		
Mailing Address 15 South Grady Way, Suite 620			Amount 14050.00		
City Seattle	State WA	Zip Code 98057	Transaction ID : B621452 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Purpose of Expenditure Polling. Full pymt. of transaction B621452 originally reported on 2016 FEC M9. See Schedule D		Category/Type 004			
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought		3209251.41	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			28100.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 50 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Work for Progress Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1543 Wazee St #440				
City Denver	State CO	Zip Code 80202	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 17700.00 </div>	
Purpose of Expenditure Canvassing			Transaction ID : B629879 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Glenn, Darryl, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 20544.50 </div>				

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Work for Progress Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1543 Wazee St #440				
City Denver	State CO	Zip Code 80202	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 17700.00 </div>	
Purpose of Expenditure Canvassing			Transaction ID : B629880 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 3209251.41 </div>				

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

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10

31

2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 51 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mission Control LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 624 Hebron Ave #200				Amount 2844.50	
City Glastonbury		State CT	Zip Code 06033	Transaction ID : B629881 Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016	
Purpose of Expenditure Canvass Lit			Category/Type 007		
Name of Federal Candidate: <input type="checkbox"/> Support Glenn, Darryl, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought 20544.50				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mission Control LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 624 Hebron Ave #200				Amount 2844.50	
City Glastonbury		State CT	Zip Code 06033	Transaction ID : B629882 Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016	
Purpose of Expenditure Canvass Lit			Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Trump, Donald, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> 0.00 </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , [Electronically Filed] Signature				Date MM / DD / YYYY 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 53 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300				
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14491.90</div>	
Purpose of Expenditure Phone Calls		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Transaction ID : B629900 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300				
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">37615.00</div>	
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	Transaction ID : B629976 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

10

31

2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 54 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report

New report

Amends report filed on

M M /

D D /

Y Y Y Y Y Y

 Full Name of Payee
Community Outreach Group LLC
☒ Memo Item

Date of Public Distribution/Dissemination

M M /

D D /

Y Y Y Y Y Y

Mailing Address 1110 Vermont Ave N.W. #300

Amount

37615.01

City

State

Zip Code

Washington

DC

20005

Purpose of Expenditure
CanvassingCategory/
Type

003

Transaction ID : B629977

Date of Disbursement or Obligation

M M /

D D /

Y Y Y Y Y Y

Name of Federal Candidate:

Clinton, Hillary, , ,

☒ Support☐ Oppose

Office Sought:

☐ House

District: _____

☒ President☐ Senate

State: US

Calendar Year-To-Date
Per Election for Office Sought

3209251.41

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶
 Full Name of Payee
Planned Parenthood Advocates of Ohio
☒ Memo Item

Date of Public Distribution/Dissemination

M M /

D D /

Y Y Y Y Y Y

Mailing Address 206 E State St.

Amount

3001.28

City

State

Zip Code

Columbus

OH

43215

Purpose of Expenditure
Phone CallsCategory/
Type

007

Transaction ID : B630167

Date of Disbursement or Obligation

M M /

D D /

Y Y Y Y Y Y

Name of Federal Candidate:

Clinton, Hillary, , ,

☒ Support☐ Oppose

Office Sought:

☐ House

District: _____

☒ President☐ Senate

State: US

Calendar Year-To-Date
Per Election for Office Sought

3209251.41

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures

0.00

(a) SUBTOTAL of Unitemized Independent Expenditures

(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 55 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates of Ohio				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016	
Mailing Address 206 E State St.				Amount 3001.28	
City Columbus		State OH		Zip Code 43215	
Purpose of Expenditure Phone Calls				Category/Type 007	
Name of Federal Candidate: Trump, Donald, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates of Ohio				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016	
Mailing Address 206 E State St.				Amount 3001.29	
City Columbus		State OH		Zip Code 43215	
Purpose of Expenditure Phone Calls				Category/Type 007	
Name of Federal Candidate: Strickland, Ted, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>OH</u>	
Calendar Year-To-Date Per Election for Office Sought 894717.12				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>				Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 56 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates of Ohio			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016		
Mailing Address 206 E State St.			Amount 3001.29		
City Columbus	State OH	Zip Code 43215	Transaction ID : B630171 Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016		
Purpose of Expenditure Phone Calls		Category/ Type 007			
Name of Federal Candidate: Portman, Rob, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought 894717.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates of Ohio			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016		
Mailing Address 206 E State St.			Amount 6002.57		
City Columbus	State OH	Zip Code 43215	Transaction ID : B630172 Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016		
Purpose of Expenditure Canvassing		Category/ Type 003			
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

Signature

[Electronically Filed]

Date MM / DD / YYYY
 10 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 57 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates of Ohio			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 206 E State St.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6002.57</div>		
City Columbus	State OH	Zip Code 43215	Transaction ID : B630173 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates of Ohio			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 206 E State St.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6002.57</div>		
City Columbus	State OH	Zip Code 43215	Transaction ID : B630174 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Strickland, Ted, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">894717.12</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , , [Electronically Filed]
 Signature Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 58 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Planned Parenthood Advocates of Ohio			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 206 E State St.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016		
City Columbus		State OH	Amount 6002.57		
Zip Code 43215		Transaction ID : B630175			
Purpose of Expenditure Canvassing		Category/Type 003		Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016	
Name of Federal Candidate: Portman, Rob, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: OH		
Calendar Year-To-Date Per Election for Office Sought 894717.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Advocates of Ohio			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 206 E State St.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016		
City Columbus		State OH	Amount 4001.71		
Zip Code 43215		Transaction ID : B630176			
Purpose of Expenditure Events		Category/Type 007		Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed] Date MM / DD / YYYY 10 / 31 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 59 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Community Outreach Group LLC			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016
Mailing Address 1110 Vermont Ave N.W. #300					Amount 18272.48
City Washington		State DC	Zip Code 20005		Transaction ID : B629893
Purpose of Expenditure Canvassing			Category/ Type 007		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 03 / 2016
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Community Outreach Group LLC			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016
Mailing Address 1110 Vermont Ave N.W. #300					Amount 18272.48
City Washington		State DC	Zip Code 20005		Transaction ID : B629894
Purpose of Expenditure Canvassing			Category/ Type 007		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 03 / 2016
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 0.00					
(a) SUBTOTAL of Unitemized Independent Expenditures ▶ 					
(a) TOTAL Independent Expenditures ▶ 					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 60 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY				
Full Name of Payee <input type="checkbox"/> Memo Item Latino Decisions			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 10 / 2016	
Mailing Address 15 South Grady Way, Suite 620			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">13600.00</div>	
City Seattle	State WA	Zip Code 98057	Transaction ID : B622314 Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016	
Purpose of Expenditure Polling. Full pymt. of transaction B622314 originally reported on 2016 FEC M9. See Schedule D			Category/Type 004	
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item Latino Decisions			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 10 / 2016	
Mailing Address 15 South Grady Way, Suite 620			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">13600.00</div>	
City Seattle	State WA	Zip Code 98057	Transaction ID : B622315 Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016	
Purpose of Expenditure Polling. Full pymt. of transaction B622315 originally reported on 2016 FEC M9. See Schedule D			Category/Type 004	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">27200.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gustafson, Liz, , ,</u>			Date MM / DD / YYYY 10 / 31 / 2016	
[Electronically Filed]				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 61 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300				Amount 10858.44	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Canvassing				Category/Type 003	
Name of Federal Candidate: Heck, Joseph, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought 1822315.07				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300				Amount 10868.92	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Canvassing				Category/Type 003	
Name of Federal Candidate: Clinton, Hillary, , ,				Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 62 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300				Amount 10868.92	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Canvassing				Category/Type 003	
Name of Federal Candidate: Trump, Donald, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300				Amount 21737.84	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Events				Category/Type 007	
Name of Federal Candidate: Clinton, Hillary, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 63 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1605 The Alameda				Amount 2394.45	
City San Jose		State CA		Zip Code 95126	
Purpose of Expenditure Canvassing-Partial payment paid on 10/6/16				Category/Type 003	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought 1822315.07				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300				Amount 14491.90	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Phone Calls				Category/Type 007	
Name of Federal Candidate: Clinton, Hillary, , ,				Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date MM / DD / YYYY 10 / 31 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 64 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1605 The Alameda				
City San Jose	State CA	Zip Code 95126	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 2993.05 </div>	
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	Transaction ID : B629920 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1605 The Alameda				
City San Jose	State CA	Zip Code 95126	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 2993.05 </div>	
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	Transaction ID : B629921 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

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10

31

2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 65 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 03 / 2016</div> </div>	
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3591.67</div>	
City San Jose	State CA	Zip Code 95126		
Purpose of Expenditure Events		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Transaction ID : B629922 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 03 / 2016</div> </div>	
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 03 / 2016</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">131668.16</div>	
City Washington	State DC	Zip Code 20005		
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	Transaction ID : B629940 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 03 / 2016</div> </div>	
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

MM / DD / YYYY

10 / 31 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 66 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300				Amount 131668.16	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Canvassing				Category/Type 003	
Name of Federal Candidate: Trump, Donald, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Calendar Year-To-Date Per Election for Office Sought 3209251.41					
Full Name of Payee <input type="checkbox"/> Memo Item Community Outreach Group LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300				Amount 46174.37	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Canvassing-Partial payment				Category/Type 003	
Name of Federal Candidate: McGinty, Katie, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u>	
Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Calendar Year-To-Date Per Election for Office Sought 2530129.72					
(a) SUBTOTAL of Itemized Independent Expenditures				46174.37	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Gustafson, Liz, , ,</u>				Date MM / DD / YYYY 10 / 31 / 2016	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item Community Outreach Group LLC		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 03 / 2016</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">10.49</div>	
City Washington	State DC	Zip Code 20005	Transaction ID : B634284 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 04 / 2016</div> </div>
Purpose of Expenditure Canvassing-Partial payment		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate: Heck, Joseph, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Community Outreach Group LLC		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 03 / 2016</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">14491.90</div>	
City Washington	State DC	Zip Code 20005	Transaction ID : B629903 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 04 / 2016</div> </div>
Purpose of Expenditure Phone Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	
Name of Federal Candidate: Heck, Joseph, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">14502.39</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gustafson, Liz, , , Signature		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 31 / 2016</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 68 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016		
Mailing Address 1110 Vermont Ave N.W. #300			Amount 14491.90		
City Washington	State DC	Zip Code 20005	Transaction ID : B629904		
Purpose of Expenditure Phone Calls		Category/ Type 007	Date of Disbursement or Obligation MM / DD / YYYY 10 / 04 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016		
Mailing Address 1110 Vermont Ave N.W. #300			Amount 10868.93		
City Washington	State DC	Zip Code 20005	Transaction ID : B629905		
Purpose of Expenditure Canvassing		Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 10 / 04 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			25360.83		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date MM / DD / YYYY 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 69 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Community Outreach Group LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016		
City Washington	State DC	Zip Code 20005	Amount 34325.63		
Purpose of Expenditure Canvassing		Category/ Type 003	Transaction ID : B632650 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2016		
Name of Federal Candidate: McGinty, Katie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 2530129.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Community Outreach Group LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016		
City Washington	State DC	Zip Code 20005	Amount 80500.00		
Purpose of Expenditure Canvassing		Category/ Type 003	Transaction ID : B632652 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2016		
Name of Federal Candidate: Toomey, Pat, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 2530129.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			114825.63		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Full Name of Payee <input type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 03 / 2016 </div>		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5434.46 </div>		
City Washington	State DC	Zip Code 20005	Transaction ID : B629895 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 04 / 2016 </div>		
Purpose of Expenditure Volunteer Recruitment		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>			
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 03 / 2016 </div>		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5434.47 </div>		
City Washington	State DC	Zip Code 20005	Transaction ID : B629896 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 04 / 2016 </div>		
Purpose of Expenditure Volunteer Recruitment		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>			
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">10868.93</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 </div>		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Community Outreach Group LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300		Amount 100000.00	
City Washington	State DC	Zip Code 20005	Transaction ID : B625129 Date of Disbursement or Obligation MM / DD / YYYY 10 / 04 / 2016
Purpose of Expenditure Canvassing. Full pymt. of transaction B625129 originally reported on 2016 FEC M10. See Schedule D		Category/Type 004	
Name of Federal Candidate: Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Drew & Rogers, Inc. <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 23 / 2016	
Mailing Address 30 Plymouth Street		Amount 3612.93	
City Fairfield	State NJ	Zip Code 07004	Transaction ID : B628180 Date of Disbursement or Obligation MM / DD / YYYY 10 / 04 / 2016
Purpose of Expenditure Small items & distribution. Full pymt. of trans. B628180 rptd. on 2016 FEC M10. See Schedule D		Category/Type 003	
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		103612.93	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gustafson, Liz, , , Signature		Date MM / DD / YYYY 10 / 31 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Blueprint Interactive				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2016	
Mailing Address 2229 North Pollard St				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">17625.00</div>	
City Arlington		State VA		Zip Code 22207	
Purpose of Expenditure Online Advertising-Updated cost from M10 report				Category/Type 004	
Name of Federal Candidate: Trump, Donald, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item Blueprint Interactive				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2016	
Mailing Address 2229 North Pollard St				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">17625.00</div>	
City Arlington		State VA		Zip Code 22207	
Purpose of Expenditure Online Advertising-Updated cost from M10 report				Category/Type 004	
Name of Federal Candidate: Clinton, Hillary, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">35250.00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , _____ Signature				Date MM / DD / YYYY 10 / 31 / 2016	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>										
Full Name of Payee <input type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 06 / 2016 </div>											
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1035.74 </div>											
City Washington State DC Zip Code 20005		Transaction ID : B625153 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 04 / 2016 </div>												
Purpose of Expenditure Volunteer Recruitment. Full pymt. of trans. B625153 rptd. on 2016 FEC M10. See Schedule D			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>											
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>											
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3209251.41 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____											
Full Name of Payee <input type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 06 / 2016 </div>											
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 12836.14 </div>											
City Washington State DC Zip Code 20005		Transaction ID : B625163 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 04 / 2016 </div>												
Purpose of Expenditure Canvassing. Full pymt. of transaction B625163 originally reported on 2016 FEC M10. See Schedule D			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>											
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>											
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3209251.41 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____											
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; border: 1px solid black; padding: 2px; text-align: right;">13871.88</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"> </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"> </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶	13871.88	(a) SUBTOTAL of Unitemized Independent Expenditures	▶		(a) TOTAL Independent Expenditures	▶	
(a) SUBTOTAL of Itemized Independent Expenditures	▶	13871.88												
(a) SUBTOTAL of Unitemized Independent Expenditures	▶													
(a) TOTAL Independent Expenditures	▶													
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Gustafson, Liz, , , Signature			[Electronically Filed] Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 </div>											

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Community Outreach Group LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 06 / 2016		
City Washington		State DC	Zip Code 20005		
Purpose of Expenditure Canvassing. Full pymt. of transaction B625164 originally reported on 2016 FEC M10. See Schedule D			Amount 12836.14		
Category/Type 004			Transaction ID : B625164 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Community Outreach Group LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
City Washington		State DC	Zip Code 20005		
Purpose of Expenditure Canvassing			Amount 37615.00		
Category/Type 003			Transaction ID : B629974 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2016		
Name of Federal Candidate: Portman, Rob, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 894717.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			50451.14		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>03</div> <div>2016</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300				
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div></div> <div>37615.00</div> <div></div> </div>	
Purpose of Expenditure Canvassing			Transaction ID : B629975 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>04</div> <div>2016</div> </div>	
Name of Federal Candidate: Strickland, Ted, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	

Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div></div> <div>894717.12</div> <div></div> </div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►				

Full Name of Payee <input type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>03</div> <div>2016</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300				
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div></div> <div>18272.48</div> <div></div> </div>	
Purpose of Expenditure Canvassing			Transaction ID : B629891 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>04</div> <div>2016</div> </div>	
Name of Federal Candidate: Johnson, Ron, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div></div> <div>135281.43</div> <div></div> </div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►				

(a) SUBTOTAL of Itemized Independent Expenditures	►	55887.48
(a) SUBTOTAL of Unitemized Independent Expenditures	►	
(a) TOTAL Independent Expenditures	►	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

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31

2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Community Outreach Group LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
City Washington		State DC	Zip Code 20005	Amount 18272.47	
Purpose of Expenditure Canvassing		Category/Type 007	Transaction ID : B629892 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2016		
Name of Federal Candidate: Feingold, Russ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought 135281.43			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Community Outreach Group LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
City Washington		State DC	Zip Code 20005	Amount 131668.17	
Purpose of Expenditure Canvassing		Category/Type 003	Transaction ID : B629942 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2016		
Name of Federal Candidate: Toomey, Pat, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 2530129.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			149940.64		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Gustafson, Liz, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Community Outreach Group LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
City Washington		State DC	Zip Code 20005	Amount 131668.17	
Purpose of Expenditure Canvassing			Category/Type 003	Transaction ID : B629943 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2016	
Name of Federal Candidate: McGinty, Katie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought			2530129.72	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Planned Parenthood Pennsylvania Advocates			<input type="checkbox"/> Memo Item		
Mailing Address 1514 North 2nd Street, Harrisburg,			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
City Harrisburg		State PA	Zip Code 17102	Amount 1875.00	
Purpose of Expenditure Phone Calls			Category/Type 007	Transaction ID : B629945 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016	
Name of Federal Candidate: McGinty, Katie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought			2530129.72	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				133543.17	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Gustafson, Liz, , ,			[Electronically Filed]	Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Pennsylvania Advocates		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 03 / 2016</div> </div>	
Mailing Address 1514 North 2nd Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1875.00</div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629947 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 06 / 2016</div> </div>
Purpose of Expenditure Phone Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	
Name of Federal Candidate: Toomey, Pat, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2530129.72</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Pennsylvania Advocates		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 03 / 2016</div> </div>	
Mailing Address 1514 North 2nd Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1875.00</div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629949 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 06 / 2016</div> </div>
Purpose of Expenditure Phone Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	
Name of Federal Candidate: Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> Senate State: US	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3750.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Gustafson, Liz, , ,		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 31 / 2016</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY				
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Pennsylvania Advocates			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1514 North 2nd Street			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">937.50</div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629950 Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016	
Purpose of Expenditure Canvassing		Category/ Type 003		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Pennsylvania Advocates			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1514 North 2nd Street			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">937.50</div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629951 Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016	
Purpose of Expenditure Canvassing		Category/ Type 003		
Name of Federal Candidate: Toomey, Pat, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought 2530129.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1875.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gustafson, Liz, , , Signature			Date MM / DD / YYYY 10 / 31 / 2016	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Planned Parenthood Pennsylvania Advocates			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 1514 North 2nd Street, Harrisburg,			Amount 937.50		
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629952		
Purpose of Expenditure Canvassing		Category/Type 003	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: McGinty, Katie, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought 2530129.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Pennsylvania Advocates			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 1514 North 2nd Street			Amount 937.50		
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629953		
Purpose of Expenditure Canvassing		Category/Type 003	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			1875.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Planned Parenthood Pennsylvania Advocates			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 1514 North 2nd Street			Amount 2250.00		
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629954		
Purpose of Expenditure Events		Category/ Type 007	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Pennsylvania Advocates			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 1514 North 2nd Street			Amount 375.00		
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629955		
Purpose of Expenditure Consultant: strategy and messaging		Category/ Type 003	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			2625.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
[Electronically Filed]					

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Planned Parenthood Pennsylvania Advocates <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1514 North 2nd Street		Amount 375.00	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629956
Purpose of Expenditure Consultant: strategy and messaging		Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016
Name of Federal Candidate: Toomey, Pat, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 2530129.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Planned Parenthood Pennsylvania Advocates <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1514 North 2nd Street, Harrisburg,		Amount 375.00	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629957
Purpose of Expenditure Consultant: strategy and messaging		Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016
Name of Federal Candidate: McGinty, Katie, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 2530129.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		750.00	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Gustafson, Liz, , ,</i>		Date MM / DD / YYYY 10 / 31 / 2016	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Pennsylvania Advocates		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 03 / 2016 </div>	
Mailing Address 1514 North 2nd Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 375.00 </div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629959 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 06 / 2016 </div>
Purpose of Expenditure Consulting: strategy and messaging		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate: Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3209251.41 </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Pennsylvania Advocates		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 03 / 2016 </div>	
Mailing Address 1514 North 2nd Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1875.00 </div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : B629883 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 06 / 2016 </div>
Purpose of Expenditure Phone Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3209251.41 </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2250.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , , [Electronically Filed]
 Signature Date

M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1605 The Alameda			Amount <input type="text"/>	
City San Jose	State CA	Zip Code 95126	Transaction ID : B629910 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Purpose of Expenditure Volunteer Recruitment		Category/Type <input type="text"/> 001	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NV	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1605 The Alameda			Amount <input type="text"/>	
City San Jose	State CA	Zip Code 95126	Transaction ID : B629911 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Purpose of Expenditure Volunteer Recruitment		Category/Type <input type="text"/> 001	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NV	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <input type="text"/> 2993.06
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ <input type="text"/>
(a) TOTAL Independent Expenditures	▶ <input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , , [Electronically Filed]
 Signature Date / /

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report ▶
 New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1496.53 </div>	
City San Jose	State CA	Zip Code 95126		
Purpose of Expenditure Volunteer Recruitment		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Transaction ID : B629912 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Trump, Donald, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1496.53 </div>	
City San Jose	State CA	Zip Code 95126		
Purpose of Expenditure Volunteer Recruitment		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Transaction ID : B629913 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support Clinton, Hillary, , , <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	2993.06
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

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2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 86 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>				
Mailing Address 1605 The Alameda							
City San Jose	State CA	Zip Code 95126	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 598.61 </div>				
Purpose of Expenditure Phone Calls			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Transaction ID : B629914 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: US		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 3209251.41 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>				
Mailing Address 1605 The Alameda							
City San Jose	State CA	Zip Code 95126	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 598.61 </div>				
Purpose of Expenditure Phone Calls			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Transaction ID : B629915 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: US		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 3209251.41 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	1197.22
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

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2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 87 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">598.61</div>	
City San Jose	State CA	Zip Code 95126		
Purpose of Expenditure Phone Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>		
Name of Federal Candidate: <input type="checkbox"/> Support Heck, Joseph, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">1822315.07</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">598.61</div>	
City San Jose	State CA	Zip Code 95126		
Purpose of Expenditure Phone Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support Cortez-Masto, Catherine, , , <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">1822315.07</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures	►	1197.22
(a) SUBTOTAL of Unitemized Independent Expenditures	►	
(a) TOTAL Independent Expenditures	►	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 88 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee GMMB			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 12 / 2016		
Mailing Address 3050 K Street, NW/Suite 300			Amount 60885.00		
City Washington	State DC	Zip Code 20007	Transaction ID : B632147		
Purpose of Expenditure Radio Advertising Buy		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016		
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016		
Mailing Address 1605 The Alameda			Amount 2993.05		
City San Jose	State CA	Zip Code 95126	Transaction ID : B629919		
Purpose of Expenditure Canvassing		Category/Type 003	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016		
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			63878.05		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date MM / DD / YYYY 10 / 31 / 2016		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee 76 Words			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016		
Mailing Address 1806 Vernon Street, Ste. #100			Amount 3625.02		
City Washington	State DC	Zip Code 20009	Transaction ID : B632152		
Purpose of Expenditure Digital Ad Production-Partial payment		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee Planned Parenthood Advocates Mar Monte			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 1605 The Alameda			Amount 598.60		
City San Jose	State CA	Zip Code 95126	Transaction ID : B634226		
Purpose of Expenditure Canvassing-Partial payment		Category/ Type 003	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures			4223.62		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 90 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount 310.27		
City Denver	State CO	Zip Code 80207	Transaction ID : B629924		
Purpose of Expenditure Volunteer Recruitment		Category/ Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Heck, Joseph, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount 310.27		
City Denver	State CO	Zip Code 80207	Transaction ID : B629925		
Purpose of Expenditure Volunteer Recruitment		Category/ Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			620.54		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 91 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY											
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Rocky Mountains Action Fund				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016							
Mailing Address 7155 E. 38th Avenue				Amount 310.26							
City Denver		State CO		Zip Code 80207							
Purpose of Expenditure Volunteer Recruitment				Category/Type 001							
Name of Federal Candidate: Clinton, Hillary, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>							
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Rocky Mountains Action Fund				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2016							
Mailing Address 7155 E. 38th Avenue				Amount 310.26							
City Denver		State CO		Zip Code 80207							
Purpose of Expenditure Volunteer Recruitment				Category/Type 001							
Name of Federal Candidate: Trump, Donald, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>							
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">▶ 620.52</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 620.52	(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 	(a) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 620.52										
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 										
(a) TOTAL Independent Expenditures	▶ 										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Gustafson, Liz, , , Signature				Date MM / DD / YYYY 10 / 31 / 2016							

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 92 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Rocky Mountains Action Fund				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016	
Mailing Address 7155 E. 38th Avenue				Amount 1085.97	
City Denver		State CO		Zip Code 80207	
Purpose of Expenditure Phone Calls				Category/Type 007	
Name of Federal Candidate: Trump, Donald, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Rocky Mountains Action Fund				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016	
Mailing Address 7155 E. 38th Avenue				Amount 1085.97	
City Denver		State CO		Zip Code 80207	
Purpose of Expenditure Phone Calls				Category/Type 007	
Name of Federal Candidate: Clinton, Hillary, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 5px; text-align: right;">2171.94</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) SUBTOTAL of Unitemized Independent Expenditures</div> <div style="border: 1px solid black; padding: 5px; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) TOTAL Independent Expenditures</div> <div style="border: 1px solid black; padding: 5px; text-align: right;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 93 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Rocky Mountains Action Fund				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 7155 E. 38th Avenue				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 1085.98 </div>	
City Denver		State CO		Zip Code 80207	
Purpose of Expenditure Phone Calls				Category/Type <div style="border: 1px solid black; padding: 2px;">007</div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 1822315.07 </div>	
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Rocky Mountains Action Fund				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 7155 E. 38th Avenue				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 1085.98 </div>	
City Denver		State CO		Zip Code 80207	
Purpose of Expenditure Phone Calls				Category/Type <div style="border: 1px solid black; padding: 2px;">007</div>	
Name of Federal Candidate: Heck, Joseph, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 1822315.07 </div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures ► <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 2171.96 </div>					
(a) SUBTOTAL of Unitemized Independent Expenditures ► <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div>					
(a) TOTAL Independent Expenditures ► <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount 930.84		
City Denver	State CO	Zip Code 80207	Transaction ID : B629933		
Purpose of Expenditure Canvassing		Category/ Type 003	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount 930.84		
City Denver	State CO	Zip Code 80207	Transaction ID : B629934		
Purpose of Expenditure Canvassing		Category/ Type 003	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			1861.68		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount 930.83		
City Denver	State CO	Zip Code 80207	Transaction ID : B629935		
Purpose of Expenditure Canvassing		Category/Type 003	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount 930.83		
City Denver	State CO	Zip Code 80207	Transaction ID : B629937		
Purpose of Expenditure Canvassing		Category/Type 003	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			1861.66		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 7155 E. 38th Avenue				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3102.80</div>	
City Denver	State CO	Zip Code 80207	Transaction ID : B629939 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Events		Category/Type 007	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Blueprint Interactive <input checked="" type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2229 North Pollard St				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">58475.00</div>	
City Arlington	State VA	Zip Code 22207	Transaction ID : B632828 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Digital Ad Buy		Category/Type 004	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Ayotte, Kelly, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">761899.22</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">3102.80</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Gustafson, Liz, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Blueprint Interactive			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 09 / 2016
Mailing Address 2229 North Pollard St			Amount 58475.00 Transaction ID : B632829 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 09 / 2016		
City State Zip Code Arlington VA 22207					
Purpose of Expenditure Digital Ad Buy					
Category/Type 004					
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee SKDKnickerbocker			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 09 / 2016
Mailing Address 1150 18th St., NW #800			Amount 1992.00 Transaction ID : B632830 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 09 / 2016		
City State Zip Code Washington DC 20036					
Purpose of Expenditure Digital Ad Commission.					
Category/Type 004					
Name of Federal Candidate: Ayotte, Kelly, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 761899.22			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 0.00 </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee SKDKnickerbocker <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 09 / 2016	
Mailing Address 1150 18th St., NW #800		Amount 1992.00	
City Washington	State DC	Zip Code 20036	Transaction ID : B632831
Purpose of Expenditure Digital Ad Commission.		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 09 / 2016
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee 76 Words <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2016	
Mailing Address 1806 Vernon Street, Ste. #100		Amount 6422.89	
City Washington	State DC	Zip Code 20009	Transaction ID : B632661
Purpose of Expenditure Digital Ad Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 10 / 2016
Name of Federal Candidate: Toomey, Pat, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought 2530129.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		6422.89	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gustafson, Liz, , , Signature		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
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 Check if ☐ 24-hour report ☐ 48-hour report

New report

Amends report filed on

 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2016

 Full Name of Payee
Priorities USA
☒ Memo Item

Date of Public Distribution/Dissemination

 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2016

Mailing Address 601 13th Street NW Suite 610N

Amount

24603.86

City

Washington

State

DC

Zip Code

20005

 Purpose of Expenditure
 Digital Ad Buy

 Category/
 Type

004

Transaction ID : B633760

Date of Disbursement or Obligation

 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2016

Name of Federal Candidate:

Trump, Donald, , ,

☐ Support☒ Oppose

Office Sought:

☐ House

District: _____

☒ President☐ Senate

State: US

 Calendar Year-To-Date
 Per Election for Office Sought

3209251.41

 Disbursement For: ☐ Primary
 2016 ☒ General
☐ Other (specify) ▶
 Full Name of Payee
Priorities USA
☒ Memo Item

Date of Public Distribution/Dissemination

 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2016

Mailing Address 601 13th Street NW Suite 610N

Amount

3660.23

City

Washington

State

DC

Zip Code

20005

 Purpose of Expenditure
 Digital Ad Buy

 Category/
 Type

004

Transaction ID : B633763

Date of Disbursement or Obligation

 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2016

Name of Federal Candidate:

Toomey, Pat, , ,

☐ Support☒ Oppose

Office Sought:

☐ House

District: _____

☐ President☒ Senate

State: PA

 Calendar Year-To-Date
 Per Election for Office Sought

2530129.72

 Disbursement For: ☐ Primary
 2016 ☒ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures

0.00

(a) SUBTOTAL of Unitemized Independent Expenditures

(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2016
Mailing Address 601 13th Street NW Suite 610N			Amount 457.92		Transaction ID : B633766 Date of Disbursement or Obligation MM / DD / YYYY 10 / 10 / 2016
City Washington		State DC	Zip Code 20005		Purpose of Expenditure Digital Ad Buy
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought			1822315.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2016
Mailing Address 601 13th Street NW Suite 610N			Amount 457.93		Transaction ID : B633769 Date of Disbursement or Obligation MM / DD / YYYY 10 / 10 / 2016
City Washington		State DC	Zip Code 20005		Purpose of Expenditure Digital Ad Buy
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought			1822315.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures ▶					0.00
(a) SUBTOTAL of Unitemized Independent Expenditures ▶					
(a) TOTAL Independent Expenditures ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed]		Date MM / DD / YYYY 10 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 457.92		
City Washington	State DC	Zip Code 20005	Transaction ID : B633770		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Name of Federal Candidate: Heck, Joseph, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 457.93		
City Washington	State DC	Zip Code 20005	Transaction ID : B633767		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 3660.23		
City Washington	State DC	Zip Code 20005	Transaction ID : B633764		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Name of Federal Candidate: Toomey, Pat, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA		
Calendar Year-To-Date Per Election for Office Sought 2530129.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 24603.86		
City Washington	State DC	Zip Code 20005	Transaction ID : B633762		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee 76 Words			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1806 Vernon Street, Ste. #100			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4124.27</div>		
City Washington	State DC	Zip Code 20009	Transaction ID : B632150 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Digital Ad Production		Category/ Type	<div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1822315.07</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			2016		

Full Name of Payee Franciska Farkas			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 102 Clinton Ave.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6500.00</div>		
City Brooklyn	State NY	Zip Code 11205	Transaction ID : B632144 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Digital Ad Production		Category/ Type	<div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">3209251.41</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			2016		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	4124.27
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016	
Mailing Address 123 William St, 10th Floor		Amount 80.00	
City New York	State NY	Zip Code 10038	Transaction ID : B632145 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 12 / 2016
Purpose of Expenditure Communications Staff Time		Category/Type 001	
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016	
Mailing Address 601 13th Street NW Suite 610N		Amount 3660.23	
City Washington	State DC	Zip Code 20005	Transaction ID : B633765 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 12 / 2016
Purpose of Expenditure Digital Ad Buy		Category/Type 004	
Name of Federal Candidate: Toomey, Pat, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		80.00	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gustafson, Liz, , , Signature		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 12 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 457.93		
City Washington	State DC	Zip Code 20005	Transaction ID : B633768 Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2016		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004			
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 24603.86		
City Washington	State DC	Zip Code 20005	Transaction ID : B633761 Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2016		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004			
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date MM / DD / YYYY 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	
Full Name of Payee Priorities USA Action			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2016
Mailing Address 601 13th Street NW Suite 610N			Amount 5000.00		Transaction ID : B632153 Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2016
City Washington		State DC	Zip Code 20005		Category/Type 004
Purpose of Expenditure Digital Ad Production			Name of Federal Candidate:		
Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate
District: _____ State: US			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Calendar Year-To-Date Per Election for Office Sought			3209251.41		2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Itzamna Translations Company			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2016
Mailing Address P.O. Box 1015			Amount 19.32		Transaction ID : B632154 Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2016
City Glendale		State AZ	Zip Code 85311		Category/Type 004
Purpose of Expenditure Translation services			Name of Federal Candidate:		
Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate
District: _____ State: NV			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Calendar Year-To-Date Per Election for Office Sought			1822315.07		2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					0.00
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed]		Date MM / DD / YYYY 10 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 601 13th Street NW Suite 610N			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016		
City Washington	State DC	Zip Code 20005	Amount 457.92		
Purpose of Expenditure Digital Ad Buy		Category/Type 004	Transaction ID : B633771 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 12 / 2016		
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee 76 Words			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1806 Vernon Street, Ste. #100			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016		
City Washington	State DC	Zip Code 20009	Amount 499.24		
Purpose of Expenditure Digital Ad Production-Partial payment		Category/Type 004	Transaction ID : B634279 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 12 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 300px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">457.93</div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">457.92</div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Heck, Joseph, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , [Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 109 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 10 13 2016 </div>		
Mailing Address 601 13th Street NW Suite 610N					
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3660.23</div>		
Purpose of Expenditure Digital Ad Buy			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : B633796 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 10 13 2016 </div>	
Name of Federal Candidate: Toomey, Pat, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">2530129.72</div>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: _____ State: <u>PA</u>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 10 13 2016 </div>		
Mailing Address 601 13th Street NW Suite 610N					
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">24603.86</div>		
Purpose of Expenditure Digital Ad Buy			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : B633798 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 10 13 2016 </div>	
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>		
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: _____ State: <u>US</u>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

10 31 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 110 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item SKDKnickerbocker			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1150 18th St., NW #800			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1368.00</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : B628832 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Ad Commission. Full pymt. of trans. B628832 rptd. on 2016 FEC M10. See Schedule D		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Trump, Donald, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee <input type="checkbox"/> Memo Item SKDKnickerbocker			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1150 18th St., NW #800			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1368.00</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : B628833 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Ad Commission. Full pymt. of trans. B628833 rptd. on 2016 FEC M10. See Schedule D		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Ayotte, Kelly, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">761899.22</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures	►	2736.00
(a) SUBTOTAL of Unitemized Independent Expenditures	►	
(a) TOTAL Independent Expenditures	►	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, ,

[Electronically Filed]

Date

M M /

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Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 111 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee GMMB			<input type="checkbox"/> Memo Item		
Mailing Address 3050 K Street, NW/Suite 300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
City Washington		State DC	Zip Code 20007		Amount 1071023.00
Purpose of Expenditure Television Ad Buy			Category/Type 004		Transaction ID : B632148 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 14 / 2016
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV		
Calendar Year-To-Date Per Election for Office Sought			1822315.07 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Community Outreach Group LLC			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016		
City Washington		State DC	Zip Code 20005		Amount 80500.00
Purpose of Expenditure Canvassing			Category/Type 003		Transaction ID : B632653 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 14 / 2016
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US		
Calendar Year-To-Date Per Election for Office Sought			3209251.41 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				1071023.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 112 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">80500.00</div>		
City Washington	State DC	Zip Code 20005	Transaction ID : B632654 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px;">003</div>			
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">3209251.41</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Terris Barnes & Walters			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Mailing Address 400 Montgomery St # 700			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3427.00</div>		
City San Francisco	State CA	Zip Code 94104	Transaction ID : B632655 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Purpose of Expenditure Canvass Lit		Category/ Type <div style="border: 1px solid black; padding: 2px;">003</div>			
Name of Federal Candidate: McGinty, Katie, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2530129.72</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 113 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y		
Full Name of Payee Terris Barnes & Walters			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 400 Montgomery St # 700			Amount 3427.00 Transaction ID : B632656 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 14 / 2016			
City San Francisco		State CA				Zip Code 94104
Purpose of Expenditure Canvass Lit		Category/Type 003				
Name of Federal Candidate: Toomey, Pat, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA	
Calendar Year-To-Date Per Election for Office Sought 2530129.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
Full Name of Payee Terris Barnes & Walters			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 400 Montgomery St # 700			Amount 3427.00 Transaction ID : B632657 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 14 / 2016			
City San Francisco		State CA				Zip Code 94104
Purpose of Expenditure Canvass Lit		Category/Type 004				
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
(a) SUBTOTAL of Itemized Independent Expenditures				0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures						
(a) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Signature <i>Gustafson, Liz, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 114 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Terris Barnes & Walters			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 400 Montgomery St # 700				
City San Francisco	State CA	Zip Code 94104	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 3427.00 </div>	
Purpose of Expenditure Canvass Lit		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : B632659 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 601 13th Street NW Suite 610N				
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 24603.86 </div>	
Purpose of Expenditure Digital Ad Buy		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : B633799 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

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31

2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 115 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 400px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3660.23</div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Toomey, Pat, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">457.92</div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Heck, Joseph, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Gustafson, Liz, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 116 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 601 13th Street NW Suite 610N				Amount 457.93	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy				Category/Type 004	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 1822315.07				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2016	
Mailing Address 601 13th Street NW Suite 610N				Amount 457.93	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy				Category/Type 004	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 1822315.07				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> 0.00 </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , [Electronically Filed] Signature				Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 117 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 400px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">457.92</div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Heck, Joseph, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1822315.07</div>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3660.23</div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Toomey, Pat, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">2530129.72</div>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Gustafson, Liz, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]				<div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 31 / 2016</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 118 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 24603.86		
City Washington	State DC	Zip Code 20005	Transaction ID : B633827		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2016		
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 24603.86		
City Washington	State DC	Zip Code 20005	Transaction ID : B633828		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 119 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 3660.23		
City Washington	State DC	Zip Code 20005	Transaction ID : B633825		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Name of Federal Candidate: Toomey, Pat, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA		
Calendar Year-To-Date Per Election for Office Sought 2530129.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 457.92		
City Washington	State DC	Zip Code 20005	Transaction ID : B633822		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Name of Federal Candidate: Heck, Joseph, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 120 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 457.93		
City Washington	State DC	Zip Code 20005	Transaction ID : B633819		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 5000.00		
City Washington	State DC	Zip Code 20005	Transaction ID : B633545		
Purpose of Expenditure Digital Ad Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 121 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Pivot Group			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1720 I Street NW Suite 550			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
City Washington		State DC	Zip Code 20005		Amount 10866.43
Purpose of Expenditure Canvass Lit		Category/Type 004		Transaction ID : B633536 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ State: NV		
Calendar Year-To-Date Per Election for Office Sought			1822315.07 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 7155 E. 38th Avenue			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
City Denver		State CO	Zip Code 80207		Amount 3241.11
Purpose of Expenditure Events		Category/Type 007		Transaction ID : B633537 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Other (specify) _____ State: US		
Calendar Year-To-Date Per Election for Office Sought			3209251.41 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 122 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 7155 E. 38th Avenue			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
City Denver	State CO	Zip Code 80207	Amount 3241.10		
Purpose of Expenditure Events		Category/ Type 007	Transaction ID : B633538 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 7155 E. 38th Avenue			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
City Denver	State CO	Zip Code 80207	Amount 3241.10		
Purpose of Expenditure Events		Category/ Type 007	Transaction ID : B633539 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Mailing Address 7155 E. 38th Avenue			Amount 3241.10		Transaction ID : B633540 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
City Denver	State CO	Zip Code 80207			
Purpose of Expenditure Events		Category/Type 007			
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought			1822315.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee Viridiana Vidal Gonzzali			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Mailing Address 4012 Linniki Street			Amount 5000.00		Transaction ID : B633541 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
City North Las Vegas	State NV	Zip Code 89032			
Purpose of Expenditure Media Consulting		Category/Type 004			
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought			1822315.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures				5000.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 124 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Viridiana Vidal Gonzzali			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4012 Linniki Street			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div> Transaction ID : B633542 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
City North Las Vegas	State NV	Zip Code 89032		
Purpose of Expenditure Media Consulting		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		

Name of Federal Candidate: <input type="checkbox"/> Support Trump, Donald, , , <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Viridiana Vidal Gonzzali			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4012 Linniki Street			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div> Transaction ID : B633543 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
City North Las Vegas	State NV	Zip Code 89032		
Purpose of Expenditure Media Consulting		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support Clinton, Hillary, , , <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3209251.41</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	10000.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 125 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item Viridiana Vidal Gonzzali				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 18 / 2016</div> </div>	
Mailing Address 4012 Linniki Street				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div>	
City North Las Vegas		State NV		Zip Code 89032	
Purpose of Expenditure Media Consulting				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate				District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General				2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 18 / 2016</div> </div>	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">457.93</div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate				District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General				2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> (a) TOTAL Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 31 / 2016</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Mailing Address 601 13th Street NW Suite 610N			Amount 457.92		Transaction ID : B633823 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
City Washington	State DC	Zip Code 20005			
Purpose of Expenditure Digital Ad Buy		Category/ Type 004			
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought 1822315.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee SKDKnickerbocker			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2016
Mailing Address 1150 18th St., NW #800			Amount 7050.00		Transaction ID : B633011 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
City Washington	State DC	Zip Code 20036			
Purpose of Expenditure Digital Ad Production		Category/ Type 004			
Name of Federal Candidate: Ayotte, Kelly, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NH
Calendar Year-To-Date Per Election for Office Sought 761899.22			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee SKDKnickerbocker			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016
Mailing Address 1150 18th St., NW #800			Amount 9125.00		Transaction ID : B633012 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
City Washington	State DC	Zip Code 20036	Purpose of Expenditure Digital Ad Production		
Category/Type 004			Name of Federal Candidate: Ayotte, Kelly, , ,		
Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NH		
Calendar Year-To-Date Per Election for Office Sought 761899.22			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Moxie Media Inc.			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016
Mailing Address 2021 Minor Ave. East			Amount 1312.50		Transaction ID : B633532 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
City Seattle	State WA	Zip Code 99102	Purpose of Expenditure Canvass Lit		
Category/Type 004			Name of Federal Candidate: Clinton, Hillary, , ,		
Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/>			Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 1312.50					
(a) SUBTOTAL of Unitemized Independent Expenditures ▶ 					
(a) TOTAL Independent Expenditures ▶ 					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Moxie Media Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 2021 Minor Ave. East			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016		
City Seattle	State WA	Zip Code 99102	Amount 1312.50		
Purpose of Expenditure Canvass Lit		Category/ Type 004	Transaction ID : B633533 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee The Pivot Group			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1720 I Street NW Suite 550			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
City Washington	State DC	Zip Code 20005	Amount 10866.43		
Purpose of Expenditure Canvass Lit		Category/ Type 004	Transaction ID : B633535 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			1312.50		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 129 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 601 13th Street NW Suite 610N				
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 3660.23 </div>	
Purpose of Expenditure Digital Ad Buy		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : B633826 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Toomey, Pat, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 2530129.72 </div>				

Full Name of Payee <input type="checkbox"/> Memo Item Moxie Media Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 2021 Minor Ave. East				
City Seattle	State WA	Zip Code 99102	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1312.50 </div>	
Purpose of Expenditure Canvass Lit		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : B633876 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Strickland, Ted, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 894717.12 </div>				

(a) SUBTOTAL of Itemized Independent Expenditures	▶	1312.50
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

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2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 130 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Moxie Media Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 2021 Minor Ave. East			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016		
City Seattle	State WA	Zip Code 99102	Amount 1312.50		
Purpose of Expenditure Canvass Lit		Category/ Type 004	Transaction ID : B633877 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Name of Federal Candidate: Portman, Rob, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: OH <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought 894717.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 601 13th Street NW Suite 610N			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
City Washington	State DC	Zip Code 20005	Amount 24603.86		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	Transaction ID : B633843 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US <input type="checkbox"/> Other (specify) ▶ _____		
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			1312.50		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 131 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Action Fund Inc.				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016	
Mailing Address 123 William St, 10th Floor				Amount 110.30	
City New York		State NY		Zip Code 10038	
Purpose of Expenditure Staff time for direct voter contact				Category/Type 001	
Name of Federal Candidate: Trump, Donald, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Action Fund Inc.				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016	
Mailing Address 123 William St, 10th Floor				Amount 110.30	
City New York		State NY		Zip Code 10038	
Purpose of Expenditure Staff time for direct voter contact				Category/Type 001	
Name of Federal Candidate: Clinton, Hillary, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; text-align: right;">220.60</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) SUBTOTAL of Unitemized Independent Expenditures</div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) TOTAL Independent Expenditures</div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date MM / DD / YYYY 10 / 31 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 132 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Action Fund Inc.			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 123 William St, 10th Floor			Amount <input type="text"/>		
City New York	State NY	Zip Code 10038	Transaction ID : B633880 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Staff time for direct voter contact		Category/ Type <input type="text"/> 001	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Strickland, Ted, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 894717.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Action Fund Inc.			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 123 William St, 10th Floor			Amount <input type="text"/>		
City New York	State NY	Zip Code 10038	Transaction ID : B633881 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Staff time for direct voter contact		Category/ Type <input type="text"/> 001	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Portman, Rob, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 894717.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <input type="text"/> 220.61
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ <input type="text"/>
(a) TOTAL Independent Expenditures	▶ <input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , , [Electronically Filed]
 Signature Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 133 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y		
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 601 13th Street NW Suite 610N			Amount 3660.23 Transaction ID : B633872 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016			
City Washington		State DC				Zip Code 20005
Purpose of Expenditure Digital Ad Buy		Category/ Type				004
Name of Federal Candidate: Toomey, Pat, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought			2530129.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee 76 Words			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016	
Mailing Address 1806 Vernon Street, Ste. #100			Amount 14968.00 Transaction ID : B632151 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016			
City Washington		State DC				Zip Code 20009
Purpose of Expenditure Radio and Television Ad Production		Category/ Type				004
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought			1822315.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 14968.00						
(a) SUBTOTAL of Unitemized Independent Expenditures ▶ 						
(a) TOTAL Independent Expenditures ▶ 						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Gustafson, Liz, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 134 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y		
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 601 13th Street NW Suite 610N			Amount 24603.86 Transaction ID : B633814 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016			
City Washington		State DC				Zip Code 20005
Purpose of Expenditure Digital Ad Buy		Category/Type 004				
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought 3209251.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2016	
Mailing Address 601 13th Street NW Suite 610N			Amount 3660.23 Transaction ID : B633815 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016			
City Washington		State DC				Zip Code 20005
Purpose of Expenditure Digital Ad Buy		Category/Type 004				
Name of Federal Candidate: Toomey, Pat, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought 2530129.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 0.00						
(a) SUBTOTAL of Unitemized Independent Expenditures ▶ 						
(a) TOTAL Independent Expenditures ▶ 						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Gustafson, Liz, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 135 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 601 13th Street NW Suite 610N			<input type="text"/> / <input type="text"/> / <input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington		State DC	Zip Code 20005		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">457.92</div>
Purpose of Expenditure Digital Ad Buy			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Transaction ID : B633816 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee Priorities USA			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 601 13th Street NW Suite 610N			<input type="text"/> / <input type="text"/> / <input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington		State DC	Zip Code 20005		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">457.93</div>
Purpose of Expenditure Digital Ad Buy			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Transaction ID : B633817 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1822315.07</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures ▶					<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶					<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures ▶					<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed]		Date <input type="text"/> / <input type="text"/> / <input type="text"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 136 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y														
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Franciska Farkas				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016										
Mailing Address 102 Clinton Ave.				Amount 4500.00										
City Brooklyn		State NY		Zip Code 11205										
Purpose of Expenditure Ad Production				Category/Type 004										
Name of Federal Candidate: <input type="checkbox"/> Support Trump, Donald, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>										
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____										
Full Name of Payee <input type="checkbox"/> Memo Item Las Vegas Billboards, LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016										
Mailing Address 5665 S. Valley View Blvd. #4				Amount 2750.00										
City Las Vegas		State NV		Zip Code 89119										
Purpose of Expenditure Advertising-Mobile billboards				Category/Type 004										
Name of Federal Candidate: <input type="checkbox"/> Support Trump, Donald, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>										
Calendar Year-To-Date Per Election for Office Sought 3209251.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; border: 1px solid black; padding: 2px;">2750.00</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶	2750.00	(a) SUBTOTAL of Unitemized Independent Expenditures	▶		(a) TOTAL Independent Expenditures	▶	
(a) SUBTOTAL of Itemized Independent Expenditures	▶	2750.00												
(a) SUBTOTAL of Unitemized Independent Expenditures	▶													
(a) TOTAL Independent Expenditures	▶													
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Gustafson, Liz, , , Signature				Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016										

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 137 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Action Fund Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">19</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Mailing Address 123 William St, 10th Floor					
City New York	State NY	Zip Code 10038	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">64.92</div>		
Purpose of Expenditure Staff Time			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Transaction ID : B633569 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">19</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">3209251.41</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____				

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Priorities USA			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">15</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Mailing Address 601 13th Street NW Suite 610N					
City Washington	State DC	Zip Code 20005	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">24603.86</div>		
Purpose of Expenditure Digital Ad Buy			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : B634433 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">15</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">3204128.37</div>			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____					

(a) SUBTOTAL of Itemized Independent Expenditures	▶	64.92
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

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31

2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 138 OF 141
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 457.92		
City Washington	State DC	Zip Code 20005	Transaction ID : B634430 Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004			
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1822315.08			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Priorities USA <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount 457.93		
City Washington	State DC	Zip Code 20005	Transaction ID : B634431 Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016		
Purpose of Expenditure Digital Ad Buy		Category/ Type 004			
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1822315.08			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date MM / DD / YYYY 10 / 31 / 2016 <div style="text-align: center;">[Electronically Filed]</div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item The Pivot Group			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1720 I Street NW Suite 550			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">341.43</div>		
City Washington	State DC	Zip Code 20005	Transaction ID : B634685 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvass Lit - Estimated Costs		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Titus, Dina, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1627.14</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1285.71</div>		
City Washington	State DC	Zip Code 20005	Transaction ID : B634686 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <div style="border: 1px solid black; padding: 2px;">007</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Titus, Dina, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1627.14</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Pivot Group			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Mailing Address 1720 I Street NW Suite 550			Amount 341.43 Transaction ID : B634718 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
City Washington	State DC	Zip Code 20005			
Purpose of Expenditure Canvass Lit - Estimated Costs		Category/ Type 004			
Name of Federal Candidate: Kihuen, Ruben, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: NV
Calendar Year-To-Date Per Election for Office Sought 1627.14			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Community Outreach Group LLC			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Mailing Address 1110 Vermont Ave N.W. #300			Amount 1285.71 Transaction ID : B634719 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
City Washington	State DC	Zip Code 20005			
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type 007			
Name of Federal Candidate: Kihuen, Ruben, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: NV
Calendar Year-To-Date Per Election for Office Sought 1627.14			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 0.00					
(a) SUBTOTAL of Unitemized Independent Expenditures ▶ 					
(a) TOTAL Independent Expenditures ▶ 					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Pivot Group			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Mailing Address 1720 I Street NW Suite 550			Amount 341.43		Transaction ID : B634720
City Washington		State DC	Zip Code 20005	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Purpose of Expenditure Canvass Lit - Estimated Costs			Category/ Type 004		
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 1627.14			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Community Outreach Group LLC			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Mailing Address 1110 Vermont Ave N.W. #300			Amount 1285.71		Transaction ID : B634721
City Washington		State DC	Zip Code 20005	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Purpose of Expenditure Canvassing-Estimated costs			Category/ Type 007		
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 1627.14			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures				2039468.01	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2016